

Introduction: Chest trauma and it's mortality is increasing rapidly. Chest injuries are variable and different is increasing rapidly. Chest injuries are variable and different from simple rib fracture to life treatening injuries such as cardiac rupture. This manifests the importance of carfull diagnosis and ontime treatment in chest trauma. In a traumatic patient, CXRay is the first simple diagnostic work up in hemodynamically stabilized patient. Thus, in this study, prevalence of different radiographic findings in CXRay in patients with chest trauma has assessed. Also missed pneumethorax and missed diaphragmatic rupture were evaluated.

Methods and materials: This study has done retrospectively. In this study all patients with chest trauma or multiple trauma that hospitalized in fatemi and Alavi hospital from farvardin 80 to shahrivar 82, were assessed. Achieved informations include: age, sex, type of trauma, chest radiographic findings, first or second hospitalization, presence or absence of diaphragmatic rupture.

Results: 204 patients were assessed in this study. They were hospitalized with chest trauma and all of them have CXRay.

Blunt chest trauma is more common from penetrating chest trauma. Different types of trauma is more common in male (espetially in penetrating truma). Prevalance of truma was more common in age group 21-30 year and less common in age group under 10 year. 27.4% of patients have normal CXRay. The most common radiographic finding in CXRay,

was rib fracture (27.4%), and less common was flail chest (0.9%). In age group under 10 year, the most common radiographic finding in CXRay, was polmunary contusion (37.5%) and in age group up to 50 year, was rib fracture (48.5%). 54.5% of rib fractures have complication and 45.5% have no complication. Pneumothorax in 23.6% of cases was missed and diaphragmatic rupture also was missed in 22.2% of cases. Diaphragmatic rupture in 67% of cases was in left side and in 33% of cases was in right side.

Offers:

- 1- According to high percent of missed pneumothorax, advised that patients with chest trauma and normal graphy, under observed in emergency department for 12h and have serial graphis in each 6h to prevention of missed pneumothorax.
- 2- According to high percent of missed diaphragmatic rupture, advised that in patient suspected to have diaphragmatic rupture and have normal graphy, if the patient is stable, used CT scan or Barium studies to prevention of missed diaphragmatic rupture.

Key words: Chest trauma, CXray.